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NOV 3 0 2004

DOCKET NO.: END920010074US1

Applicants: Budell et al.

Scrial No.: 10/042,031

Piled: 1/8/2002

Por: VENTS WITH SIGNAL IMAGE FOR SIGNAL RETURN PATH

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Request for Reconsideration

Sir:

This Request for Reconsideration is in response to the Office Action mailed September 9,

2004.

Scrial No.: 10/042,031

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PAGE 214 'RCVD AT 110022004 248:14 PM [Eastern Standard Time] 'SVR:USPTO-EFXOF-46 'DNS:2726306' CSD: 'DURATION (non-sci203-14

04/25/2005 P10MES1 00000001 090457 10042031 01 FC:1201 88.00 DA 01 FC:1202 10042031

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UTILITY PATENT APPLICATION TRANSMITTAL (Large Entity)

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Docket No. END920010074US1

Total Pages in this Submission

Eas	Calculation	and Tr	anemittai

CLAIMS AS FILED								
Til For	#Filed	#Allowed	#Extra	-	Rate	Fee		
iji Total Claims	20	-20 =	0	x	\$18.00	\$0.00		
lrįdep. Claims	3	- 3 =	0	x	\$84.00	\$0.00		
Måltiple Dependen	t Claims (checl	(if applicable)				\$0.00		
0)					BASIC FEE	\$740.00		
THER FEE (specify purpose)						\$0.00		
TOTAL FILING FEE								
						<u> </u>		

☐ A check in the amount of

to cover the filing fee is enclosed.

The Commissioner is hereby authorized to charge and credit Deposit Account No.

09-0457

as described below. A duplicate copy of this sheet is enclosed.

Charge the amount of

\$740.00

as filing fee.

Credit any overpayment.

Charge any additional filing fees required under 37 C.F.R. 1.16 and 1.17.

☐ Charge the issue fee set in 37 C.F.R. 1.18 at the mailing of the Notice of Allowance,

pursuant to 37 C.F.R. 1.311(b).

Dated:

Lawrence R. Fraley, Reg. No. 26,885 IBM Corporation / IP Law N50/040-4

1701 North Street Endicott, NY 13760 Telephone: (607)755-3207 (607)755-3250 Fax No.:

cc: RECORDS

Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

10042031

CLAIMS AS FILED - PART (Column 1)				(Column 2) SMALL ENTITY				OTHER THAN OR SMALL ENTITY				
TOTAL CLAIMS		20					RATE	FEE		RATE	FEE	
FOR		NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS Ze			20_min	26_minus 20= *			X\$ 9=		OR	X\$18=	·	
INDEPENDENT CLAIMS			3 - minus 3 = *		*			X42=		OR	X84=	
MULTIPLE DEPENDENT CLAIM PRI			RESENT			+140=		OR	+280=			
* If the difference in column 1 is le			less than zero, enter "0" in column 2				TOTAL		OR	TOTAL	740	
CLAIMS AS AMENDED - PART II OTHER THAN									THAN			
11	/30/04	(Column 1)		(Colu		(Column 3)	١,	SMALL		OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST HBER OUSLY FOR	PRESENT EXTRA	·	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MQ.	Total	· 28	Minus	**)	0	-8		X\$ 9=		OR	X\$18=	144
AME	Independent	. 4	Minus	***	<u>ろ</u>	=		X42=		OR	X84=	පිහි
لــا	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=		OR	+280 =	
		_					1	TOTAL ADDIT, FEE		OR	TOTAL ADDIT, FEE	
		(Column 1)		(Colu	ımn 2)	(Column 3				•		
ENT B		CLAIMS REMAINING AFTER AMENDMENT		NUA PREV	HEST MBER IOUSLY DFOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MON	Total	•	Minus	地		=		X\$ 9=		OR	X\$18=	
AMENDMENT	Independent	*	Minus	***		-	4	X42=		OR	X84=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +140= OR +280=											
								TOTAL ADDIT, FEE		OR	TOTAL ADDIT, FEE	
		(Column 1)		(Colu	ımn 2)	(Column 3	<u>)</u>					
ENTC		CLAIMS REMAINING AFTER AMENDMENT		NU! PREV	HEST MBER TIOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AMENDMENT	Independent	*	Minus	***		-	4	X42=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +140= OR +280=												
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											
-	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE ADDIT. FEE ADDIT. FEE The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											